

EXHIBIT A

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF Delaware		GRACE NON-ASBESTOS PROOF OF CLAIM FORM
Name of Debtor: <i>W.R. Grace & Co., et al.</i>	Case Number <i>01-01139 (SKF)</i>	THIS SPACE IS FOR COURT USE ONLY
NOTE: Do not use this form to assert an Asbestos Personal Injury Claim, a Settled Asbestos Claim or a Zonolite Attic Insulation Claim. Those claims will be subject to a separate claims submission process. This form should also not be used to file a claim for an Asbestos Property Damage Claim or Medical Monitoring Claim. A specialized proof of claim form for each of these claims should be filed.		
Name of Creditor (The person or other entity to whom the Debtor owes money or property): <i>Cendant Mobility Services Corporation</i>	<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input checked="" type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.	
Name and address where notices should be sent: <i>Cendant Mobility Services Corporation Attn: Wayne Rigit 40 Apple Ridge Ranch Danbury, CT 06810</i>		
Account or other number by which creditor identifies Debtor:	Check here <input type="checkbox"/> replaces if this claim <input type="checkbox"/> amends a previously filed claim, dated: _____	
Corporate Name, Common Name, and/or d/b/a name of specific Debtor against whom the claim is asserted: <i>W.R. Grace & Co. - Conn.</i>		
1. Basis for Claim <input type="checkbox"/> Goods sold <input checked="" type="checkbox"/> Services performed <input type="checkbox"/> Environmental liability <input type="checkbox"/> Money loaned <input type="checkbox"/> Non-asbestos personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other _____	<input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Wages, salaries, and compensation (fill out below)	
Your SS #: _____ Unpaid compensation for services performed from _____ to _____ (date)		
2. Date debt was incurred: <i>Various</i>	3. If court judgment, date obtained: <i>5/270, 250. 62</i>	
4. Total Amount of Claim at Time Case Filed: <small>If all or part of your claim is secured or entitled to priority, also complete Item 5 below.</small>	<input checked="" type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.	
5. Classification of Claim. Under the Bankruptcy Code all claims are classified as one or more of the following: (1) Unsecured Nonpriority, (2) Unsecured Priority, (3) Secured. It is possible for part of a claim to be in one category and part in another. CHECK THE APPROPRIATE BOX OR BOXES that best describe your claim and STATE THE AMOUNT OF THE CLAIM AT TIME CASE FILED.		
□ SECURED CLAIM (check this box if your claim is secured by collateral, including a right of setoff.) Brief Description of Collateral: <input type="checkbox"/> Real Estate <input type="checkbox"/> Other (Describe briefly) _____	□ UNSECURED PRIORITY CLAIM - Specify the priority of the claim. <input type="checkbox"/> Wages, salaries, or commissions (up to \$4650), earned not more than 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3). <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4). <input type="checkbox"/> Taxes or penalties of governmental units - 11 U.S.C. § 507(a)(7). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a) _____.	
Amount of arrearage and other charges <u>at time case filed</u> included in secured claim above, if any: \$ _____ Attach evidence of perfection of security interest		
<input checked="" type="checkbox"/> UNSECURED NONPRIORITY CLAIM A claim is unsecured if there is no collateral or lien on property of the debtor securing the claim or to the extent that the value of such property is less than the amount of the claim.		
6. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.	This Space is for Court Use Only	
7. Supporting Documents: <u>Attach copies of supporting documents</u> , such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.		
8. Acknowledgement: Upon receipt and processing of this Proof of Claim, you will receive an acknowledgement card indicating the date of filing and your unique claim number. If you want a file stamped copy of the Proof of Claim form itself, enclose a self addressed envelope and copy of this proof of claim form.		
Date: <i>3/1/01</i>	Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any): <i>Brett Klaus Senior Vice President</i>	

Statement of Account
W.R. Grace & Co. - Conn.
As of March 24, 2003

<u>Client No.</u>	<u>Client Name</u>	<u>Employee Name</u>	<u>File No.</u>	<u>Invoice No.</u>	<u>Invoice Type</u>	<u>Invoice Date</u>	<u>Due Date</u>	<u>Amount Due</u>
3183	W.R. Grace & Co. - Conn.	Millie Lempereur	1040274	L25740	Expense	2/13/03	3/15/03	241.56
3183	W.R. Grace & Co. - Conn.	Becker	706401	K17773	Expense	10/01/02	10/31/02	10,704.17
3183	W.R. Grace & Co. - Conn.	Millie	701763	K17774	Expense	10/01/02	10/31/02	804.00
3183	W.R. Grace & Co. - Conn.	Ahmed	1040274	K09745	Expense	09/21/02	10/21/02	474.34
3183	W.R. Grace & Co. - Conn.	Reid	701787	F64344	Late Fee	05/09/01	06/23/01	822.41
3183	W.R. Grace & Co. - Conn.	Hayes	703045	E57512	Late Fee	1/10/01	2/24/01	1,455.38
3183	W.R. Grace & Co. - Conn.	Moeller	703764	E57513	Expense	1/10/01	2/9/01	995.85
3183	W.R. Grace & Co. - Conn.	Merrill	10655757	E57514	Advance	1/10/01	2/24/01	33,225.00
3183	W.R. Grace & Co. - Conn.	Hayes	714065	E35032	Late Fee	1/22/01	551.19	
3183	W.R. Grace & Co. - Conn.	Musson	703764	E35033	Expense	1/28/00	1/7/01	995.85
3183	W.R. Grace & Co. - Conn.	O'Gorman	714574	D81373	Expense	10/11/00	11/25/00	775.00
3183	W.R. Grace & Co. - Conn.	Millie	706197	D50667	Expense	9/12/00	10/27/00	19,500.67
3183	W.R. Grace & Co. - Conn.	Harding	1040274	D50668	Expense	9/12/00	10/12/00	1,320.00
3183	W.R. Grace & Co. - Conn.	Hall	1040283	D50669	Expense	9/12/00	10/12/00	1,320.00
3183	W.R. Grace & Co. - Conn.	Normand	1042492	D22940	Late Fee	8/11/00	9/10/00	117.42
3183	W.R. Grace & Co. - Conn.	Blackmore	1045370	D22941	Late Fee	8/11/00	9/10/00	196.32
3183	W.R. Grace & Co. - Conn.	Ahmed	1054800	D22942	Late Fee	8/11/00	9/10/00	1,230.83
3183	W.R. Grace & Co. - Conn.	MacDonald	701787	D22943	Expense	8/11/00	9/25/00	7,545.00
3183	W.R. Grace & Co. - Conn.	Nigro	706646	D22944	Expense	8/11/00	9/25/00	322.45
3183	W.R. Grace & Co. - Conn.	Williams	712119	D22945	Expense	8/11/00	9/10/00	3,026.84
3183	W.R. Grace & Co. - Conn.	Millie	1039725	D22946	Expense	8/11/00	9/10/00	1,320.00
3183	W.R. Grace & Co. - Conn.	Harding	1040274	D22947	Expense	8/11/00	9/10/00	13,399.72
3183	W.R. Grace & Co. - Conn.	Nigro	1040283	D22948	Expense	8/11/00	9/10/00	3,817.27
3183	W.R. Grace & Co. - Conn.	Dunn	1042456	D22949	Expense	8/11/00	9/10/00	1,320.00
3183	W.R. Grace & Co. - Conn.	Hall	1042484	D22950	Expense	8/11/00	9/10/00	15,061.78
3183	W.R. Grace & Co. - Conn.	Normand	1042492	D22951	Expense	8/11/00	9/10/00	1,320.00
3183	W.R. Grace & Co. - Conn.	Stief	1045370	D22952	Expense	8/11/00	9/10/00	1,320.00
3183	W.R. Grace & Co. - Conn.	Clark	1051538	D22953	Expense	8/11/00	9/10/00	9,647.49
3183	W.R. Grace & Co. - Conn.	Lafferty	1054183	D22955	Expense	8/11/00	9/10/00	3,680.54
3183	W.R. Grace & Co. - Conn.	Blackmore	1054800	D22956	Expense	8/11/00	9/10/00	11,327.53
3183	W.R. Grace & Co. - Conn.	Iddins	1062250	D22957	Expense	8/11/00	9/10/00	1,320.00
3183	W.R. Grace & Co. - Conn.	MacDonald	1069687	D22958	Expense	8/11/00	9/10/00	910.00

**Statement of Account
W.R. Grace & Co. - Conn.
As of March 24, 2003**

<u>Client No.</u>	<u>Employee Name</u>	<u>File No.</u>	<u>Invoice No.</u>	<u>Invoice Type</u>	<u>Invoice Date</u>	<u>Due Date</u>	<u>Amount Due</u>
3183	W.R. Grace & Co. - Conn. Becker	701763	D22959	Expense	8/11/00	9/10/00	4,174.00
3183	W.R. Grace & Co. - Conn. Lafferty	708880	D22960	Expense	8/11/00	9/10/00	888.66
3183	W.R. Grace & Co. - Conn. Smith	1016985	C89762	Late Fee	7/11/00	8/25/00	131.24
3183	W.R. Grace & Co. - Conn. Miller	1018095	C89763	Late Fee	7/11/00	8/25/00	6,703.20
3183	W.R. Grace & Co. - Conn. Hayes	703764	C89764	Expense	7/11/00	8/10/00	995.85
3183	W.R. Grace & Co. - Conn. Spangenberg	713507	C89765	Late Fee	7/11/00	8/25/00	825.41
3183	W.R. Grace & Co. - Conn. Hayes	703764	C38729	Expense	5/12/00	6/11/00	995.85
3183	W.R. Grace & Co. - Conn. Williams	1040112	C08731	Expense	4/12/00	5/12/00	1,320.00
3183	W.R. Grace & Co. - Conn. Hayes	703764	13284	Expense	3/17/00	4/16/00	995.85
3183	W.R. Grace & Co. - Conn. Fohlmann	713543	981358	Expense	2/10/00	3/11/00	11,751.35
3183	W.R. Grace & Co. - Conn. Fraser	1027611	981359	Expense	2/10/00	3/11/00	1,156.42
3183	W.R. Grace & Co. - Conn. Harding	1040283	962513	Expense	1/18/00	2/17/00	16,750.72
3183	W.R. Grace & Co. - Conn. Blackmore	1054800	962518	Expense	1/18/00	2/17/00	14,372.11
3183	W.R. Grace & Co. - Conn. Hayes	703764	949657	Expense	1/5/00	2/4/00	1,991.70
3183	W.R. Grace & Co. - Conn. Nigro	712119	949658	Expense	1/5/00	2/4/00	18,615.86
3183	W.R. Grace & Co. - Conn. Shen	712491	949659	Expense	1/5/00	2/4/00	2,063.06
3183	W.R. Grace & Co. - Conn. Roberts	713720	949660	Expense	1/5/00	2/4/00	3,233.85
3183	W.R. Grace & Co. - Conn. Fraser	1027611	949661	Expense	1/5/00	2/4/00	1,156.42
3183	W.R. Grace & Co. - Conn. N/A	N/A	949662	Late Fee	1/5/00	2/4/00	195.97
3183	W.R. Grace & Co. - Conn. Nigro	712119	786560	Expense	6/23/99	7/23/99	2,351.71
3183	W.R. Grace & Co. - Conn. Fraser	1027611	786562	Expense	6/23/99	7/23/99	2,058.22
3183	W.R. Grace & Co. - Conn. N/A	N/A	9673IA	Holesale Closing	4/9/99	5/9/99	4,942.85
3183	W.R. Grace & Co. - Conn. N/A	N/A	6330AA	Holesale Closing	4/7/99	5/7/99	8,611.21
3183	W.R. Grace & Co. - Conn. N/A	N/A	0784JB	Holesale Closing	3/25/99	4/24/99	1,133.40
3183	W.R. Grace & Co. - Conn. N/A	N/A	0973JB	Holesale Closing	2/28/99	3/30/99	1,133.40
3183	W.R. Grace & Co. - Conn. N/A	N/A	1023CA	Holesale Upfront	2/28/99	3/30/99	3,795.00
3183	W.R. Grace & Co. - Conn. N/A	N/A	1736DA	Holesale Closing	2/26/99	3/28/99	3,059.01
3183	W.R. Grace & Co. - Conn. Baker	N/A	0629JB	Holesale Closing	2/12/99	3/14/99	10,200.37
3183	W.R. Grace & Co. - Conn. Piedra	N/A	0172JC	Expense	1/13/99	2/12/99	519.54
3183	W.R. Grace & Co. - Conn. Piedra	N/A	0174JC	Expense	1/13/99	2/12/99	1,133.40
3183	W.R. Grace & Co. - Conn.			Miscellaneous Credits			(8,393.62)
							\$270,250.62
						Total Due	

**W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044**

Attn: Ms. Kelly Boyce

Invoice Date	02/13/2003
Invoice Number	L25740
Reference Number	3078114
Total Invoice	\$241.56
Due Date	03/15/2003

SERVICE INFORMATION

Employee Name and Address

Miss Sarah Millie

File Information

Employee File Number:	1040274
Tax ID Number:	
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

Client Number: 3183

Division: 900 Version: 05

Billing Number:

COST INFORMATION

Moving/storage Of Household Goods

241.56

Total Amount Due Cendant Mobility

\$241.56

Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

Invoice Date	02/13/2003
Invoice Number	L25740
Employee Name	Miss Sarah Millie
Employee File Number	1040274

BILLING DETAIL INFORMATION

MOVING/STORAGE OF HOUSEHOLD GOODS

A. Household Goods Insurance	56.16
B. Permanent Storage	185.40
Total Moving/storage Of Household Goods	<hr/>
Total Amount Due Cendant Mobility	\$241.56
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W.R. Grace & Co. - Conn.
One Town Center Rd.
Boca Raton FL 33486

Attn: Mr. Lynne Prescott

Invoice Date	10/01/2002
Invoice Number	K17773
Reference Number	3071735
Total Invoice	\$10,704.17
Due Date	10/31/2002

SERVICE INFORMATION

Employee Name and Address <i>Mr. FRED LEMPEREUR</i>	File Information
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Client Number: 3183
Division: 005 Version: 01

Employee File Number: 706401
Tax ID Number:
Billing Type: Expense
Acquisition Type: Direct Reimbursement

Billing Number:

COST INFORMATION

Moving/storage Of Household Goods	10,704.17
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Total Amount Due Cendant Mobility	\$10,704.17
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Due and Payable Upon Receipt

Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

**W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044**

Attn: Ms. Kelly Boyce

Invoice Date	10/01/2002
Invoice Number	K17774
Reference Number	3071734
Total Invoice	\$804.00
Due Date	10/31/2002

SERVICE INFORMATION

Employee Name and Address

Mr. MARK BECKER

File Information

Employee File Number:	701763
Tax ID Number:	—
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

**Client Number: 3183
Division: 900 Version: 01**

Billing Number:

COST INFORMATION

Moving/storage Of Household Goods	804.00
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Total Amount Due Cendant Mobility	\$804.00
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Due and Payable Upon Receipt

Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

Invoice Date	10/01/2002
Invoice Number	K17774
Employee Name	Mr. MARK BECKER
Employee File Number	701763

BILLING DETAIL INFORMATION

MOVING/STORAGE OF HOUSEHOLD GOODS

A. International shipment	804.00
Total Moving/storage Of Household Goods	<hr/> \$804.00
<i>Total Amount Due Cendant Mobility</i>	<u>\$804.00</u>

W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044
Attn: Ms. Kelly Boyce

Invoice Date	09/21/2002
Invoice Number	K09745
Reference Number	3071174
Total Invoice	\$474.34
Due Date	10/21/2002

SERVICE INFORMATION**Employee Name and Address**
*Miss Sarah Millie***File Information**

Employee File Number:	1040274
Tax ID Number:	
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

Client Number: **3183**
Division: **900** Version: **05**

Billing Number:

COST INFORMATION

Moving/storage Of Household Goods	474.34
Total Amount Due Cendant Mobility	\$474.34

Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

Invoice Date	09/21/2002
Invoice Number	K09745
Employee Name	Miss Sarah Millie
Employee File Number	1040274

BILLING DETAIL INFORMATION

MOVING/STORAGE OF HOUSEHOLD GOODS

A. Household Goods Insurance	112.32
B. Permanent Storage	362.02
Total Moving/storage Of Household Goods	<hr/>
<i>Total Amount Due Cendant Mobility</i>	<u>\$474.34</u>

W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044

Attn: Ms. Kelly Boyce

Invoice Date	05/09/2001
Invoice Number	F64344
Reference Number	3043276
Total Invoice	\$822.41
Due Date	06/23/2001

SERVICE INFORMATION

Employee Name and Address
Mr. DILSHAD AHMED

Client Number: 3183
Division: 900 Version: 03

Billing Number

File Information

Employee File Number:	701787
Tax ID Number:	
Billing Type:	<i>Additional Interest</i>
Acquisition Type:	<i>Appraised Value</i>
Contract Date:	01/11/1999
Closing Date:	04/23/1999

COST INFORMATION

Reference Information

Invoice Number:	D22943
Invoice Date:	08/11/2000
Date Paid:	04/30/2001
Amount:	\$7,545.00

Additional Interest	822.41
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Total Amount Due Cendant Mobility	\$822.41
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W.R. Grace & Co. - Conn.
7500 Grace Dr
Columbia MD 21044

Attn: Ms. Marihelen Johnson

Invoice Date	01/10/2001
Invoice Number	E57512
Reference Number	3036180
Total Invoice	\$1,455.38
Due Date	02/24/2001

SERVICE INFORMATION

Employee Name and Address

XXXX
XX NO PROPERTY ADDRESS XX
ON FILE X X

Client Number: 3183
Division: 001 Version: 03

Billing Number

File Information

Employee File Number:	703045
Tax ID Number:	
Billing Type:	<i>Additional Interest</i>
Acquisition Type:	Amended Value
Contract Date:	10/19/2000

COST INFORMATION

Reference Information

Invoice Number:	5965CA
Invoice Date:	09/30/1998
Date Paid:	12/19/2000
Amount:	\$3,795.00

Additional Interest	1,455.38
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Total Amount Due Cendant Mobility	\$1,455.38
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W.R. Grace & Co. - Conn.
7500 Grace Dr
Columbia MD 21044

Attn: Ms. Marihelen Johnson

Invoice Date	01/10/2001
Invoice Number	E57513
Reference Number	3036180
Total Invoice	\$995.85
Due Date	02/09/2001

SERVICE INFORMATION

Employee Name and Address
Mr. GARY J. HAYES

Client Number: 3183
Division: 001 Version: 02

File Information

Employee File Number:	703764
Tax ID Number:	
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

Billing Number:

COST INFORMATION

Moving/storage Of Household Goods	995.85
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<i>Total Amount Due Cendant Mobility</i>	\$995.85
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Due and Payable Upon Receipt

Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

W.R. Grace & Co. - Conn.
62 Whitmore Ave.
Cambridge MA 02140
Attn: Ms. Abby Smith

Invoice Date	01/10/2001
Invoice Number	E57514
Reference Number	3036180
Total Invoice	\$33,225.00
Due Date	02/24/2001

SERVICE INFORMATION**Employee Name and Address**
Mr. Eric Moeller

Client Number: 3183
Division: 009 Version: 03

File Information

Employee File Number:	1065757D
Tax ID Number:	
Billing Type:	Homesale Acquisition
Acquisition Type:	Appraised Value

Contract Date: 01/05/2001

COST INFORMATION

Purchase Price	\$276,875.00
Homesale Acquisition	33,225.00
<i>Total Amount Due Cendant Mobility</i>	\$33,225.00

Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

W.R. Grace & Co. - Conn.
7500 Grace Dr
Columbia MD 21044

Attn: Ms. Marihelen Johnson

Invoice Date	12/08/2000
Invoice Number	E35032
Reference Number	3034774
Total Invoice	\$551.19
Due Date	01/22/2001

SERVICE INFORMATION

Employee Name and Address
Mr. CRAIG MERRILL

Client Number: 3183
Division: 001 Version: 03

Billing Number

File Information

Employee File Number:	714065
Tax ID Number:	
Billing Type:	<i>Additional Interest</i>
Acquisition Type:	Amended Value
Contract Date:	10/19/2000

COST INFORMATION

Reference Information

Invoice Number:	786561
Invoice Date:	06/23/1999
Date Paid:	11/06/2000
Amount:	\$2,406.93

Additional Interest	551.19
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Total Amount Due Cendant Mobility	\$551.19
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W.R. Grace & Co. - Conn.
7500 Grace Dr
Columbia MD 21044

Attn: Ms. Marihelen Johnson

Invoice Date	12/08/2000
Invoice Number	E35033
Reference Number	3034774
Total Invoice	\$995.85
Due Date	01/07/2001

SERVICE INFORMATION

Employee Name and Address Mr. GARY J. HAYES	File Information Employee File Number: 703764
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Client Number: 3183
Division: 001 Version: 02

Tax ID Number:
Billing Type: Expense
Acquisition Type: Direct Reimbursement

Billing Number:

COST INFORMATION

Moving/storage Of Household Goods	995.85
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<i>Total Amount Due Cendant Mobility</i>	\$995.85
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Due and Payable Upon Receipt

Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

W.R. Grace & Co. - Conn.
7500 Grace Dr
Columbia MD 21044

Attn: Ms. Marihelen Johnson

Invoice Date	10/11/2000
Invoice Number	D81373
Reference Number	3031435
Total Invoice	\$775.00
Due Date	11/25/2000

SERVICE INFORMATION

Employee Name and Address
Mr. BRADY MUSSON

File Information

Employee File Number:	714574
Tax ID Number:	
Billing Type:	
Acquisition Type:	Expense Renter

Client Number: 3183
Division: 001 Version: 03

Billing Number:

COST INFORMATION

Service Fee

775.00

Total Amount Due Cendant Mobility

\$775.00

Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044

Attn: Ms. Kelly Boyce

Invoice Date	09/12/2000
Invoice Number	D50667
Reference Number	3029846
Total Invoice	\$19,500.67
Due Date	10/27/2000

SERVICE INFORMATION

Employee Name and Address
Mr. KEVIN O'GORMAN

Client Number: 3183
Division: 900 **Version:** 03

File Information

Employee File Number:	706197
Tax ID Number:	—
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

Billing Number:

COST INFORMATION

Service Fee	1,320.00
Moving/storage Of Household Goods	18,180.67
<i>Total Amount Due Cendant Mobility</i>	<i>\$19,500.67</i>

Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

**W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044**

Attn: Ms. Kelly Boyce

Invoice Date	09/12/2000
Invoice Number	D50668
Reference Number	3029846
Total Invoice	\$1,320.00
Due Date	10/12/2000

SERVICE INFORMATION

Employee Name and Address
Miss Sarah Millie

Client Number: 3183
Division: 900 Version: 05

File Information

Employee File Number:	1040274
Tax ID Number:	
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

Billing Number:

COST INFORMATION

Service Fee

1,320.00

Total Amount Due Cendant Mobility

\$1,320.00

W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044

Attn: Ms. Kelly Boyce

Invoice Date	09/12/2000
Invoice Number	D50669
Reference Number	3029846
Total Invoice	\$1,320.00
Due Date	10/12/2000

SERVICE INFORMATION

Employee Name and Address

Mr. Robert Harding

File Information

Employee File Number:	1040283
Tax ID Number:	
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

Client Number: **3183**
Division: **900** Version: **05**

Billing Number:

COST INFORMATION

Service Fee

1,320.00

Total Amount Due Cendant Mobility

\$1,320.00

Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044

Attn: Ms. Kelly Boyce

Invoice Date	08/11/2000
Invoice Number	D22940
Reference Number	3028228
Total Invoice	\$117.42
Due Date	09/10/2000

SERVICE INFORMATION

Employee Name and Address
Mr. Barry Hall

File Information
 Employee File Number: **1042492**
 Tax ID Number:
 Billing Type: **Additional Interest**

Client Number: **3183**
 Division: **900** Version: **05**

Billing Number

COST INFORMATION

Reference Information

Invoice Number:	962515
Invoice Date:	01/18/2000
Date Paid:	07/03/2000
Amount:	\$1,701.71

Additional Interest	117.42
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Total Amount Due Cendant Mobility	\$117.42
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W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044

Attn: Ms. Kelly Boyce

Invoice Date	08/11/2000
Invoice Number	D22941
Reference Number	3028228
Total Invoice	\$196.32
Due Date	09/10/2000

SERVICE INFORMATION

Employee Name and Address

Mr. Pierre Normand

File Information

Employee File Number:	1045370
Tax ID Number:	
Billing Type:	<i>Additional Interest</i>

Client Number: 3183
Division: 900 **Version:** 05

Billing Number

COST INFORMATION

Reference Information

Invoice Number:	962516
Invoice Date:	01/18/2000
Date Paid:	03/13/2000
Amount:	\$15,101.71

Additional Interest	196.32
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<i>Total Amount Due Cendant Mobility</i>	<i>\$196.32</i>
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Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044
Attn: Ms. Kelly Boyce

Invoice Date 08/11/2000
Invoice Number D22942
Reference Number 3028228
Total Invoice \$1,230.83
Due Date 09/10/2000

SERVICE INFORMATION

Employee Name and Address
Mr. Mark Blackmore

File Information
Employee File Number: 1054800
Tax ID Number:
Billing Type: *Additional Interest*

Client Number: 3183
Division: 900 Version: 05

Billing Number 7368-0001-401030

COST INFORMATION

Reference Information

Invoice Number: 967120
Invoice Date: 01/22/2000
Date Paid: 08/01/2000
Amount: \$15,102.19

Additional Interest 1,230.83

Total Amount Due Cendant Mobility **\$1,230.83**

Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

**W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044**

Attn: Ms. Kelly Boyce

Invoice Date	08/11/2000
Invoice Number	D22943
Reference Number	3028228
Total Invoice	\$7,545.00
Due Date	09/25/2000

SERVICE INFORMATION

Employee Name and Address
Mr. DILSHAD AHMED

Client Number: 3183
Division: 900 Version: 03

File Information

Employee File Number:	701787
Tax ID Number:	
Billing Type:	Expense
Acquisition Type:	Homeowner

Billing Number:

COST INFORMATION

Service Fee	3,795.00
International Services	3,750.00
<i>Total Amount Due Cendant Mobility</i>	\$7,545.00

Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

**W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044**

Attn: Ms. Kelly Boyce

Invoice Date	08/11/2000
Invoice Number	D22944
Reference Number	3028228
Total Invoice	\$322.45
Due Date	09/25/2000

SERVICE INFORMATION

Employee Name and Address
Mr. ALISTAR C. MACDONALD

Client Number: 3183
Division: 900 **Version:** 03

File Information

Employee File Number:	706646
Tax ID Number:	--
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

Billing Number:

COST INFORMATION

Moving/storage Of Household Goods	322.45
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<i>Total Amount Due Cendant Mobility</i>	<i>\$322.45</i>
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Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

**W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044**

Attn: Ms. Kelly Boyce

Invoice Date	08/11/2000
Invoice Number	D22945
Reference Number	3028228
Total Invoice	\$3,026.84
Due Date	09/10/2000

SERVICE INFORMATION

Employee Name and Address

Mr. KEN NIGRO

File Information

Employee File Number:	712119
Tax ID Number:	
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

**Client Number: 3183
Division: 900 Version: 05**

Billing Number:

COST INFORMATION

Other Service Fee	330.00
Service Fee	1,320.00
Moving/storage Of Household Goods	1,376.84
<i>Total Amount Due Cendant Mobility</i>	<i>\$3,026.84</i>

Billing Notes

**Other Service Fees Include:
Moving Service Fee Of \$330.**

Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

**W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044**

Attn: Ms. Kelly Boyce

Invoice Date	08/11/2000
Invoice Number	D22946
Reference Number	3028228
Total Invoice	\$1,320.00
Due Date	09/10/2000

SERVICE INFORMATION

Employee Name and Address

Mr. Barry Williams

File Information

Employee File Number:	1039725
Tax ID Number:	
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

Client Number: 3183
Division: 900 Version: 05

Billing Number:

COST INFORMATION

Service Fee

1,320.00

Total Amount Due Cendant Mobility

\$1,320.00

Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044

Attn: Ms. Kelly Boyce

Invoice Date	08/11/2000
Invoice Number	D22947
Reference Number	3028228
Total Invoice	\$13,399.72
Due Date	09/10/2000

SERVICE INFORMATION

Employee Name and Address

Miss Sarah Millie

File Information

Employee File Number:	1040274
Tax ID Number:	
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

Client Number: **3183**
Division: **900** Version: **05**

Billing Number:

COST INFORMATION

Other Service Fee	330.00
Moving/storage Of Household Goods	13,069.72
<i>Total Amount Due Cendant Mobility</i>	<i>\$13,399.72</i>

Billing Notes

Other Service Fees Include:
\$330 Moving Service Fee

Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044

Attn: Ms. Kelly Boyce

Invoice Date	08/11/2000
Invoice Number	D22948
Reference Number	3028228
Total Invoice	\$3,817.27
Due Date	09/10/2000

SERVICE INFORMATION

Employee Name and Address

Mr. Robert Harding

Client Number: 3183
Division: 900 Version: 05

File Information

Employee File Number:	1040283
Tax ID Number:	
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

Billing Number:

COST INFORMATION

Other Service Fee
International Services

330.00
3,487.27

Total Amount Due Cendant Mobility

\$3,817.27

Billing Notes

Other Service Fees Include:
\$330 Moving Service Fee

Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044

Attn: Ms. Kelly Boyce

Invoice Date	08/11/2000
Invoice Number	D22949
Reference Number	3028228
Total Invoice	\$1,320.00
Due Date	09/10/2000

SERVICE INFORMATION

Employee Name and Address <i>Mr. Ken Nigro</i>	File Information
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Client Number:	3183
Division:	900
Version:	05

Employee File Number:	1042456
Tax ID Number:	
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

Billing Number:

COST INFORMATION

Service Fee	1,320.00
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<i>Total Amount Due Cendant Mobility</i>	\$1,320.00
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Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044

Attn: Ms. Kelly Boyce

Invoice Date	08/11/2000
Invoice Number	D22950
Reference Number	3028228
Total Invoice	\$15,061.78
Due Date	09/10/2000

SERVICE INFORMATION

Employee Name and Address

Mr. Paul Dunn

Client Number: 3183
Division: 900 Version: 05

File Information

Employee File Number:	1042484
Tax ID Number:	
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

Billing Number:

COST INFORMATION

Other Service Fee	330.00
Service Fee	1,320.00
Moving/storage Of Household Goods	13,411.78
Total Amount Due Cendant Mobility	\$15,061.78

Billing Notes

Other Service Fees Include:
Moving Service Fee Of \$330.

Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044

Attn: Ms. Kelly Boyce

Invoice Date	08/11/2000
Invoice Number	D22951
Reference Number	3028228
Total Invoice	\$1,320.00
Due Date	09/10/2000

SERVICE INFORMATION

Employee Name and Address

Mr. Barry Hall

File Information

Employee File Number:	1042492
Tax ID Number:	
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

Client Number: **3183**
Division: **900** Version: **05**

Billing Number:

COST INFORMATION

Service Fee

1,320.00

Total Amount Due Cendant Mobility

\$1,320.00

Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044

Attn: Ms. Kelly Boyce

Invoice Date	08/11/2000
Invoice Number	D22952
Reference Number	3028228
Total Invoice	\$1,320.00
Due Date	09/10/2000

SERVICE INFORMATION

Employee Name and Address
Mr. Pierre Normand

Client Number: 3183
Division: 900 Version: 05

File Information

Employee File Number:	1045370
Tax ID Number:	
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

Billing Number:

COST INFORMATION

Service Fee

1,320.00

Total Amount Due Cendant Mobility

\$1,320.00

Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

**W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044**

Attn: Ms. Kelly Boyce

Invoice Date	08/11/2000
Invoice Number	D22953
Reference Number	3028228
Total Invoice	\$1,320.00
Due Date	09/10/2000

SERVICE INFORMATION

Employee Name and Address

Mr. Joe Stief

File Information

Employee File Number:	1047013
Tax ID Number:	
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

Client Number: 3183
Division: 900 Version: 05

Billing Number:

COST INFORMATION

Service Fee

1,320.00

Total Amount Due Cendant Mobility

\$1,320.00

Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287

W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044
Attn: Ms. Kelly Boyce

Invoice Date	08/11/2000
Invoice Number	D22954
Reference Number	3028228
Total Invoice	\$9,647.49
Due Date	09/10/2000

SERVICE INFORMATION

Employee Name and Address

Mr. Alan Clark

File Information

Employee File Number:	1051538
Tax ID Number:	
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

Client Number: **3183**
Division: **900** Version: **05**

Billing Number:

COST INFORMATION

Business Expense	101.71
Other Service Fee	330.00
Service Fee	1,320.00
Moving/storage Of Household Goods	7,895.78
<i>Total Amount Due Cendant Mobility</i>	<i>\$9,647.49</i>

Billing Notes

Moving Service Fee Of \$330.

W.R. Grace & Company
7500 Grace Dr.
Columbia MD 21044

Attn: Ms. Kelly Boyce

Invoice Date	08/11/2000
Invoice Number	D22955
Reference Number	3028228
Total Invoice	\$3,680.54
Due Date	09/10/2000

SERVICE INFORMATION

Employee Name and Address

Mr. Bud Lafferty

File Information

Employee File Number:	1054183
Tax ID Number:	
Billing Type:	Expense
Acquisition Type:	Direct Reimbursement

Client Number: **3183**
Division: **900** Version: **05**

Billing Number:

COST INFORMATION

Business Expense	43.67
Other Service Fee	330.00
Service Fee	1,320.00
Moving/storage Of Household Goods	1,986.87
<i>Total Amount Due Cendant Mobility</i>	<i>\$3,680.54</i>

Payments not received in full by due date will be subject to additional interest in accordance with the service agreement
Please Remit to: CENDANT MOBILITY SERVICES CORPORATION P.O. Box 360287 Pittsburgh, PA 15250-6287